Document

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 2 of 60

Debtor 1

JENNIFER M. REYES
First Name Middle Name

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Fí	rst	N	an	0	 		dle	

Case number (if known)\_

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Number (EIN) you have used it	I have not used any business names or EINs.	$oxedsymbol{\square}$ I have not used any business names or EINs.			
the last 8 years	Business name	Business name			
Include trade names and					
doing business as names	Business name	Business name			
	EIN	EIN			
	EIN	EIN			
. Where you live	A PARAMETER PARA	If Debtor 2 lives at a different address:			
	1805 MADISON STREET				
	Number Street	Number Street			
	APT 1				
	EVANSTON IL 60202				
	City State ZiP Code	City State ZIP Cod			
	COOK COUNTY				
	County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number Street	Number Street			
	P.O. Box	P.O. Box			
	City State ZIP Code	City State ZIP Code			
Why you are choosing	тельной компенской положения положения положения в положен	Check one:			
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, have lived in this district longer than in any other district.			
	☐ I have another reason. Explain.	☐ I have another reason. Explain.			
	(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)			

Case 19-04309 Doc 1

Filed 02/19/19 Document

Entered 02/19/19 11:01:17 Desc Main Page 3 of 60

JENNIFER M. REYES
First Name Middle Name

Last Name

Case number (if known)\_

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		-			_	

Debtor 1

## **Tell the Court About Your Bankruptcy Case**

7.	The chapter of the Bankruptcy Code you	Check of for Bank	ne. (For ruptcy (I	a brief description of each, see <i>Not</i> Form 2010)). Also, go to the top of p	ice Required by 11 age 1 and check th	U.S.C. § 342(b) for Individuals Filing ne appropriate box.		
	are choosing to file under	Chapter 7						
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	loca your subr with  I nee for li  I rec By la less pay	I court for self, you nitting you a pre-ped to ped	or more details about how you ru may pay with cash, cashier's cour payment on your behalf, your inted address.  The fee in installments. If you hals to Pay The Filing Fee in Installments at my fee be waived (You may dge may, but is not required to, 50% of the official poverty line the	may pay. Typicall check, or money ur attorney may bu choose this operallments (Official request this optional applies to you his option, you m	order. If your attorney is pay with a credit card or check oftion, sign and attach the <i>Application</i> Form 103A).  ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the <i>Application to Have the</i>		
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District		MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District	When	MM/DD/YYYY	Relationship to you  Case number, if known		
				When	MM / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	No. Yes.	No.	ne 12. ur landlord obtained an eviction judg Go to line 12.	ment against you?	Against You (Form 101A) and file it as		

Case 19-04309 Doc 1 Filed 02/19/19

Document

Entered 02/19/19 11:01:17 Desc Main Page 4 of 60

Debtor 1

JENNIFER M. REYES
First Name Middle Name

Last Name

Case number (# known)\_

Are you a sole proprietor	🛮 No.	No. Go to Part 4.						
of any full- or part-time business?	☐ Yes	. Name and location of b	ousiness					
A sole proprietorship is a								
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any			W ************************************			
LLC.		Number Street						
If you have more than one sole proprietorship, use a separate sheet and attach it		***************************************						
to this petition.		City	***************************************	St	ate	ZIP Code		
		Check the appropriate	box to describe v	our husiness:				
			=		/27 <b>Δ</b> \\			
		<ul> <li>☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))</li> <li>☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))</li> </ul>						
		Stockbroker (as de		-	( <del>-</del> )			
		Commodity Broker (as defined in 11 U.S.C. § 101(6))						
	None of the above							
business debtor, see 11 U.S.C. § 101(51D).	<ul> <li>No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.</li> <li>Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.</li> </ul>							
Report if You Own	or Have	Any Hazardous Pro	perty or Any P	roperty That I	Needs I	mmediate A	Attention	
Do you own or have any	<b>☑</b> No							
property that poses or is alleged to pose a threat	☐ Yes.	What is the hazard??						
of imminent and identifiable hazard to public health or safety? Or do you own any								
property that needs immediate attention?		If immediate attention	is needed, why is	it needed?				
						100000000000000000000000000000000000000		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?								
perishable goods, or livestock that must be fed, or a building		Where is the property		Street			-	
perishable goods, or livestock that must be fed, or a building		Where is the property?		Street			-	

Case 19-04309

Doc 1

Filed 02/19/19 Document Entered 02/19/19 11:01:17 Page 5 of 60

Desc Main

Debtor 1

JENNIFER M. REYES

Middle Name

Last Name

Case number (if known)\_

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing abou
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

	am	not	required	to	receive	a	briefing	about
-	cred	it co	unselino	h	ecause d	٦f		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01

Document

Entered 02/19/19 11:01:17 Desc Main Page 6 of 60

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JENNIFER M. REYES
First Name Middle Name

La	si i	Vai	'n

Case number (# known)\_\_\_\_\_

Pá	art 6: Answer These Ques	stions for Reporting Purposes
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
	,	<ul><li>No. Go to line 16b.</li><li>✓ Yes. Go to line 17.</li></ul>
		16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.
		16c. State the type of debts you owe that are not consumer debts or business debts.
17.	Are you filing under Chapter 7?	□ No. I am not filing under Chapter 7.
≈i vydanomo	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No  Yes
18.	How many creditors do you estimate that you owe?	<ul><li>☑ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>
19.	How much do you estimate your assets to be worth?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million
20.	How much do you estimate your liabilities to be?	☑ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million
Pā	117: Sign Below	
Fo	r you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.
		If I have chosen to file under Chapter 7, 1 am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter 7, and I choose to proceed under Chapter 7.
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. \$6,152, 1341, 1519, and 3571.
		Signature of Debtor 2 Signature of Debtor 2
		Executed on MM / DD / YYYY Executed on MM / DD / YYYY

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 7 of 60 Document

JENNIFER M. REYES Debtor 1

Middle Name

Last Name

Case number (# known)\_

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also

be familiar with any state exemption laws that apply.	
Are you aware that filing for bankruptcy is a serious acconsequences?  No Yes	tion with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprison. No Yes	and that if your bankruptcy forms are oned?
Did you pay or agree to pay someone who is not an at  ☑ No ☑ Yes. Name of Person	
By signing here, I acknowledge that I understand the ri have read and understood this notice, and I am aware attorney may cause me to lose my rights or property if	that filing a bankruptcy case without an
Signature of Debtor 1	Signature of Debtor 2
Date MM / DD / YYYYY	Date MM / DD / YYYY
Contact phone 7734408844	Contact phone
Ceil phone 7734408844	Ceil phone
Email address JENNIFERMREYES@HOTMAIL.COM	Email address

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 8 of 60

Document Page 8 of 60	
Fill in this information to identify your case:	
Debtor 1 JENNIFER M. REYES	
First Name Middle Name Last Name Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number [if known]	Check if this is an amended filing
	amondou mang
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Info	rmation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new Summary and check the box at the top of this page.	supplying correct schedules after you file
Part 1: Summarize Your Assets	
	V
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	s 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$3955.00
1c. Copy line 63, Total of all property on Schedule A/B	
· · · · · · · · · · · · · · · · · · ·	\$ 3955.00
Part 2: Summarize Your Liabilities	
	Your liabilities
2. Schodulo Di Croditore Whe Have Claims Seeved by Demonts (Official Form 400D)	Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)     2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ s 19232.30
Your total liabilities	\$ 19232.30
Part 3: Summarize Your Income and Expenses	·
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$1850.00
5. Schedule J: Your Expenses (Official Form 106J)	

Copy your monthly expenses from line 22c of Schedule J

2475.00

Case 19-04309 Doc 1 Filed 02/19/19 Entered Document Page 9

Debtor 1

JENNIFER M. REYES

First Name Middle Name Last Name

Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 9 of 60

Case number (# known)

2	art 4: Answer These Questions for Administrative and Statistical Records	S	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No.  Yes		
7.	What kind of debt do you have?  ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by ar family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.  ✓ Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	oses. 28 U.S.C. § 159.	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	s <u>2574.99</u>
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	төөө Э дөөйөдөө Төөбө Төө гийн хөв Төв бай бай даланынын өөрөө бөөө Э дөөрөө үйсөөө үйсөө ойон үе сайгаа
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$0.00	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
	9d. Student loans. (Copy line 6f.)	\$8426.00	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00	
	9g. <b>Total.</b> Add lines 9a through 9f.	\$ 8426.00	

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 0 of 60 Fill in this information to identify your case and this filing: JENNIFER M. REYES Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name I ast Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land Investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? ☐ Land Investment property Describe the nature of your ownership ☐ Timeshare City ZIP Code State interest (such as fee simple, tenancy by ☐ Other ☐ the entireties, or a life estate), if known. Who has an interest in the property? Check one.

Official Form 106A/B

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Debtor 1 only
Debtor 2 only

☐ Check if this is community property

(see instructions)

Debtor 1	GENERAL MIDDLE SOC 1 First Name Middle Name Last Name	Filed 02/19/19 Entered 02/19/19 1 Document Page 11 of 60 number (f)	1:01:17 Desc l	Main
1.3.	Street address, if available, or other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i>
			\$	s.
			Ψ	Ψ
	City State ZIP Code	Investment property Timeshare	Describe the nature	of your ownership
	Old Zir Code	Other	interest (such as fee	simple, tenancy by
		- Company of the Comp	the entireties, or a lif	e estate), if known.
		Who has an interest in the property? Check one.		Water to the second sec
	County	Debtor 1 only		
	•	Debtor 2 only	Check if this is co	
		Debtor 1 and Debtor 2 only  At least one of the debtors and another	(see instructions)	minumity property
		Other information you wish to add about this ite property identification number:	em, such as local	
		ll of your entries from Part 1, including any entrie		s 0.00
you r	have attached for Part 1. Write that number h	nere	······································	
ou own	that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles	st in any vehicles, whether they are registered or a second or sec	not? Include any vehicle: and Unexpired Leases.	<b>S</b>
O Y				
<b>****</b> 1				
3.1.	Make:	Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only  At least one of the debtors and another	entire property?	portion you own?
	Other information:	At least one of the deptors and another		
		☐ Check if this is community property (see instructions)	\$	\$
lf you	own or have more than one, describe here:			
2.0	Make:	Who has an interest in the property? Check one.	Do not deduct a room to t	lana an ana ana an an an
3.2.		Debtor 1 only	Do not deduct secured cla the amount of any secured	I claims on Schedule D:
	Model:	Debtor 2 only	Creditors Who Have Clain	is Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:		_	
		☐ Check if this is community property (see instructions)	\$	\$

	***************************************	Who has an interest in the property? Check one.	Do not deduct secured cia	aims or exemptions. Put
Model:		Debtor 1 only	the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D.</i>
Year:		Debtor 2 only		
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile		At least one of the debtors and another	entire property	portion you own?
Other information	1;		¢	•
1000		☐ Check if this is community property (see instructions)	<b>~</b>	Ψ
.4, Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
Model:		Debtor 1 only	the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
Year:		Debtor 2 only	and the second second	
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile		At least one of the debtors and another	entire property:	portion you own?
Other Information		Check if this is community property (see instructions)	\$	\$
		her recreational vehicles, other vehicles, and acces rraft, fishing vessels, snowmobiles, motorcycle accesso		
<i>kamples:</i> Boats, trailer No Yes		who has an interest in the property? Check one.		claims on Schedule D:
kamples: Boats, trailer No Yes  Make:	rs, motors, personal waterd	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure	I claims on Schedule D:
xamples: Boats, trailer No Yes  Make: Model:	rs, motors, personal waterd	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	I claims on Schedule D: is Secured by Property. Current value of the
kamples: Boats, trailer No Yes  Make: Model: Year:	rs, motors, personal waterd	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule Da as Secured by Property.
amples: Boats, trailer No Yes  Make: Model: Year:	rs, motors, personal waterd	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on Schedule D: as Secured by Property.  Current value of the
kamples: Boats, trailer No Yes  Make: Model: Year:	rs, motors, personal water	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	I claims on Schedule Dass Secured by Property.  Current value of the portion you own?
Amples: Boats, trailer  No Yes  Make: Model: Year: Other information	rs, motors, personal water	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured cla the amount of any securec Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured claim	I claims on Schedule Das Secured by Property.  Current value of the portion you own?  \$
Amples: Boats, trailer  No Yes  Make:  Model:  Year:  Other information  You own or have more  Make:	than one, list here:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any securec Creditors Who Have Claim Current value of the entire property?  \$  Do not deduct secured clai the amount of any secured	d claims on Schedule Days Secured by Property.  Current value of the portion you own?  \$
Amples: Boats, trailer  No Yes  Make:  Model:  Year:  Other information  You own or have more  Make:  Model:	than one, list here:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any securec Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured clai the amount of any secured Creditors Who Have Claim	d claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$
Amples: Boats, trailer  No Yes  Make: Model: Year: Other information  You own or have more Make: Model: Year:	than one, list here:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured claithe amount of any secured Creditors Who Have Claim  Current value of the	d claims on Schedule Das Secured by Property.  Current value of the portion you own?  \$
Amples: Boats, trailer  No Yes  Make:  Model:  Year:  Other information  You own or have more  Make:  Model:	than one, list here:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any securec Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured clai the amount of any secured Creditors Who Have Claim	d claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$

First Name Middle Name Last Name Document Page 12 of 60 Entered 02/19/19 11:01:17 Desc Main Page 12 of 60 Entered 02/19/19 11:01:17 Desc Main

# Part 3: Describe Your Personal and Household Items

			Current	alue of the
De	you own or have any i	egal or equitable interest in any of the following items?	portion y	
			Do not ded or exemption	uct secured claims
6.	Household goods and	furnishings	•	
	Examples: Major appliar	nces, furniture, linens, china, kitchenware		
	☐ No			
	Yes. Describe	BED, BEDDING, COOKING UTENSILS, EATING UTENSILS, PICTURE FRAMES, AND TOWELS	\$	200.00
7.	Electronics			
	collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	☐ No ☐ Yes. Describe	SMARTPHONE AND TV	\$	1500.00
8.	Collectibles of value			
	Examples: Antiques and	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe		\$	0.00
9.	Equipment for sports a	nd hobbies		
	and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
	No "		*******	
	Yes. Describe		\$	0.00
10.	Firearms			
	☑ No	shotguns, ammunition, and related equipment		
	Yes. Describe		\$	0.00
11.	Clothes			
	Examples: Everyday clo	thes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe	ALL CLOTHES AND FOOTWEAR	\$	150.00
12.	Jewelry			
	Examples: Everyday jew gold, silver	relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	□ No	DOAOE ET ELDONOO AND NOMBRE		E 00
		BRACELET, EARRINGS, AND NON-WEDDING RING	\$	5.00
13.	Non-farm animals Examples: Dogs, cats, b	irds, horses		
	No No		*	
	Yes. Describe		\$	0.00
14.	Any other personal and	household items you did not already list, including any health aids you did not list	M. parried	
	No No			
	Yes. Give specific information.	A compared of months and a contract of the second of the s	\$	0.00
		all of your entries from Part 3, including any entries for pages you have attached mber here	\$	1855.00

ł	•	rt	4	,	

## **Describe Your Financial Assets**

Do you own or have any	y legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured clair or exemptions.
16. <b>Cash</b> Examples: Money you	ı have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition	
☐ No			
☑ Yes		Cash:	s\$
17. Deposits of money  Examples: Checking, and other s	savings, or other financial accou similar institutions. If you have m	unts; certificates of deposit; shares in credit unions, brokerage hor ultiple accounts with the same institution, list each.	uses,
☑ Yes		Institution name:	
	17.1. Checking account:	TCF BANK	\$50.00
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		\$
	17.7. Other financial account:		\$
	17.8. Other financial account:		
	17.9. Other financial account:		
	Institution or issuer name:	erage firms, money market accounts	\$
19. Non-publicly traded s an LLC, partnership,	stock and interests in incorpor and joint venture	rated and unincorporated businesses, including an interest in	n
☑ No	Name of entity:	% of ownership:	
Yes. Give specific information about	***************************************	%	\$
them	***************************************	%	\$
		%	\$

Negotiable instruments	orate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. ents are those you cannot transfer to someone by signing or delivering them.	
✓ No  ✓ Yes. Give specific information about them	Issuer name:	¢
WiGht		\$ \$
		\$
☑ No	accounts RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes. List each account separately.	Type of account: Institution name:	
	401(k) or similar plan:	\$
	Pension plan:	\$
	IRA:	\$
	Retirement account:	\$
	Keogh:	\$
	Additional account:	\$
	Additional account:	\$
22. <b>Security deposits and p</b> Your share of all unused <i>Examples:</i> Agreements companies, or others	prepayments deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
No D		
Yes	Institution name or individual:  Electric:	
	Gas:	\$
	Heating oil:	\$
	Security deposit on rental unit:	\$ \$
	Prepaid rent:	\$
	Telephone:	\$
	Water:	\$
	Rented furniture:  Other:	\$
	Outgr.	\$
☑ No	a periodic payment of money to you, either for life or for a number of years)  Issuer name and description:	

2	6 U.S.C. §§ 530(b)(1), 529A(b		ount in a qualified ABLE program, or under a qualified s (b)(1).	tate tuition program.	
	<b>1</b> No				
C	Yes	Institution	name and description. Separately file the records of any inte	rests.11 U.S.C. § 521(	(c):
			, , , , , , , , , , , , , , , , , , , ,		<del>-</del> ).
					\$
					\$
		***************************************			\$
25. <b>T</b> i	rusts, equitable or future int xercisable for your benefit	erests in <sub>l</sub>	property (other than anything listed in line 1), and rights	or powers	
E	<b>1</b> No				
	Yes. Give specific		TO THE CONTROL OF THE STATE OF	MANNET TO THE THE STATE TO A STATE WAS ARRIVED A MAJORIA AS STATE OF THE ASSESSMENT AND ARRIVED AS THE STATE OF	500 to 100 to 10
	information about them				\$0.00
		geneen emanean oon wissamarysee,		ande ander som til fin a, enforcement an entre mension ha desse transacionement experiencement (grand politica), frança de la final frança de la f	ovank.
			secrets, and other intellectual property		
		ies, websi	es, proceeds from royalties and licensing agreements		
	No				on the same
	Yes. Give specific				0.00
	information about them				\$ 0.00
	· · · · · · · · · · · · · · · · · · ·			At 1922, v. 1 and a 4 a special control of the second background by the St. 1975, and a 19	
	icenses, franchises, and oth		l intangibles nses, cooperative association holdings, liquor licenses, profe		
		NUSIVE IICE	rises, cooperative association notdings, liquor licenses, profe	issional licenses	
	1 No		TA AND AN AN AN AND AND AND AND AND AND A	ere contracted decisions by the contract project operators by the contract of	n Marg
L	Yes. Give specific information about them				s 0.00
	information about them			That and the advenue of a section of the section of	\$0.00
Mon	ey or property owed to you?		(4) 1 (1) (1) (1) (1) (1) (1) (1) (1) (1)		Current value of the
			N.		portion you own?  Do not deduct secured
					claims or exemptions.
28. <b>T</b> a	ex refunds owed to you				
	<b>〕</b> No				
Z	1 Yes. Give specific information		Annual de la company de la com	Fadaal	¢ 2000.00
	about them, including v			Federal:	<b>P</b> = 000.00
	you already filed the re and the tax years			State:	\$
	•			Local:	\$
			an make da ka makagaban-daya sapara (migar 1, prografi sababanda a manamanana ka pir i Maka fara a manamana maka maka maka maka maka ma	3	
	amily support				
E	xamples: Past due or lump sui	n alimony,	spousal support, child support, maintenance, divorce settler	nent, property settleme	ent
Z	<b>1</b> No				
	Yes. Give specific information	วก			
				Alimony:	\$
				Maintenance:	\$
				Support:	\$
				Divorce settlement:	\$
				Property settlement:	\$
30.0	thar amounte comoono o	e voi:	Enterprise (Communication of the Communication of t		
50. <b>5</b>	ther amounts someone owe xamples: Unpaid wages, disat	ility insura	nce payments, disability benefits, sick pay, vacation pay, wo	rkers' compensation	
	Social Security bene	fits; unpaid	I loans you made to someone else		
	<b>1</b> No		1/4MAN MUNICIPAL MANAGEMENT AND MANA		
	Yes. Give specific information	n	The second secon	an Parkilland Albanian (Magaellanga) enganeses Abdolin Abdolin (Magaellan and Andrea) and ann gal	
					. 0.00

31. Interests in insurance policies  Examples: Health, disability, or life insu  No	rance;health savings account (H	SA);credit, homeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
			\$
			\$
			\$
property because someone has died.  No	t, expect proceeds from a life ins	d urance policy, or are currently entitled to receive	
Yes. Give specific information			s 0.00
33. Claims against third parties, whether Examples: Accidents, employment disposed No ☐ Yes. Describe each claim	or not you have filed a lawsuit utes, insurance claims, or rights t	t or made a demand for payment to sue	POLICY AND ADMINISTRATION OF THE PROPERTY OF T
			\$
34. Other contingent and unliquidated cla to set off claims  No		counterclaims of the debtor and rights	
Yes. Describe each claim	440		e 0.00
35. Any financial assets you did not alrea  ☑ No ☐ Yes. Give specific information			\$
<ol> <li>Add the dollar value of all of your entifor Part 4. Write that number here</li> </ol>	ries from Part 4, including any	entries for pages you have attached	\$ 2100.00
Part 5: Describe Any Business 37. Do you own or have any legal or equit		Own or Have an Interest In. List any	/ real estate in Part 1.
No. Go to Part 6.	able interest in any business-r	elated property?	
Yes. Go to line 38.			
			Current value of the portion you own?  Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions	you already earned		
No Yes. Describe	in deriver was now and the first for the transmission of the second section of the section of the second section of the section of the second section of the sectio		- Consideration for
v v			\$
39. Office equipment, furnishings, and su	pplies	achines, rugs, telephones, desks, chairs, electronic devi	ces
Yes. Describe	h Mariera transmente de l'indicate de l'indice de l'in		acamana,
	19. 19. 19. 19. 19. 19. 19. 19. 19. 19.		\$

Debtor 1	Gessqu49	k943824EB0	oc 1	Filed 02/19/19	Entered (	02/19/19 11:01:17	Desc Main
Debior 1	First Name	Middle Name	Last Nam	• Document	Page 18 o	Case number (if known)	

40. Machinery, fixtures, equipment, supp	olies you use in business, and tools of your trade	
□ No		
☐ Yes. Describe		P-1000000000000000000000000000000000000
Answers to the standard of the first of the standard of the st		S.
41. Inventory		
20		
Yes. Describe		\$
		in the state of th
42. Interests in partnerships or joint vent  No	ures	
Yes. Describe Name of entity:	% of owners	ship:
V-16-2	%	\$
	%	\$
VIII.	%	\$
43. Customer lists, mailing lists, or other	compilations	
□ No		
	ally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
☐ No		
Yes. Describe	The state of the s	Control of
		\$
44. Any business-related property you di		recommendation of property (
☐ No		
Yes. Give specific		•
information		_ \$
	V-44 (Matter Latter)	\$
		_ \$
		\$
		_
		_ 3
	ries from Part 5, including any entries for pages you have attached	
Part 6: Describe Any Farm- and 0	Commercial Fishing-Related Property You Own or Have an Inter	rant la
If you own or have an interes	st in farmland, list it in Part 1.	est in.
	table interest in any farm- or commercial fishing-related property?	
No. Go to Part 7.		
Yes. Go to line 47.		
		Current value of the
		portion you own?
		Do not deduct secured claims or exemptions.
47. Farm animals		•
Examples: Livestock, poultry, farm-raised	d fish	
□ No		
☐ Yes		TPo-Mich (Phil) Liceles
		\$
Service and an account of the service of the servic		Ψ

Debtor 1	GENNE Middle Name Last Name DOCK	02/19/19 Entered 02/19/19 11:01:17 Iment Page 19 of 60	Desc Main
48. <b>Crops—e</b>	ither growing or harvested		
☐ No			Michaelah Antologia, Missa Kung
	Sive specific ation		\$
49. Farm and	fishing equipment, implements, machinery, fix	tures, and tools of trade	т в ментополичии d
Yes			and the second s
50. Farm and	fishing supplies, chemicals, and feed		\$
☐ No			
Yes		and the state of t	\$
51. Any farm	and commercial fishing-related property you c	lid not already list	The address of the second seco
	Sive specific		***************************************
inform	ation.		\$
52. Add the of for Part 6	ollar value of all of your entries from Part 6, inc Write that number here	cluding any entries for pages you have attached	→ \$ 0.00
Examples: 9 No Yes. 6 inform	Season tickets, country club membership live specific ation		\$
Part 8: _ L	ist the Totals of Each Part of this Fo	rm	
55. Part 1: To	af real estate, line 2		<b>→</b> \$0.00
56. Part 2: To	al vehicles, line 5	\$0.00	
57. Part 3: To	al personal and household items, line 15	\$1855.00	
58. Part 4: To	al financial assets, line 36	\$2100.00	
59. Part 5: Tot	al business-related property, line 45	\$0	
60. Part 6: Tot	al farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Tot	al other property not listed, line 54	<b>+</b> \$	
62. Total pers	onal property. Add lines 56 through 61	\$ 3955.00 Copy personal property to	tal → +\$ 3955.00
63. Total of all	property on Schedule A/B. Add line 55 + line 62	•	\$3955.00

	Cas	e 19-04309 DOC 1	Filed 02/19/19	Page 20 of 60	17 Desc Main
Fi	ll in this inform	ation to identify your case:		oleanidada OI OU	
De	ebtor 1 JEN	NIFER M. REYES			
	First N	ame Middle Name	Last Name	Nachada Hariba da na	
	ebtor 2 pouse, if filing) First N	ame Middle Name	Last Name		
Ur	nited States Bankr,	uptcy Court for the: NORTHERN	N DISTRICT OF ILLIN	ois	
	ase number known)				Check if this is an amended filing
Of	ficial Forr	n 106C			
S	chedul	e C: The Prop	perty You	Claim as Exemp	<b>t</b> 04/16
Usir spac	ng the property y ce is needed, fill	ou listed on Schedule A/B: Prop	perty (Official Form 106A	gether, both are equally responsible for VB) as your source, list the property that dditional Page as necessary. On the top	you claim as exempt. If more
spe of a retir	cific dollar amo ny applicable s rement funds— ts the exemptio	unt as exempt. Alternatively, tatutory limit. Some exemptio may be unlimited in dollar am	you may claim the full ons—such as those for nount. However, if you nt and the value of the	mount of the exemption you claim. O fair market value of the property beir health aids, rights to receive certain claim an exemption of 100% of fair mproperty is determined to exceed that	ng exempted up to the amount benefits, and tax-exempt arket value under a law that
Pa	art 1: Identi	fy the Property You Claim	ı as Exempt		
	You are cla You are cla	xemptions are you claiming? iming state and federal nonbant iming federal exemptions. 11 U ty you list on Schedule A/B th	kruptcy exemptions. 11 J.S.C. § 522(b)(2)	· · · · · · · · · · · · · · · · · · ·	
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	HOUSEHOLD	<b>\$</b> 200.00	<b>☑</b> \$ 200.00	735 III. Comp. Stat. 5/12-1001 (b)
	Line from Schedule A/B:	6	-	100% of fair market value, up to any applicable statutory limit	:
	Brief	ELECTRONICS	\$ 1500.00		735 HI Comp. Stat. 5/42 4004 (b.)
	description: Line from Schedule A/B:	7	\$1500.00	\$1500.00  100% of fair market value, up to any applicable statutory limit	735 III. Comp. Stat. 5/12-1001 (b)
	Brief description:	CLOTHES	\$150.00	<b>2</b> \$ 150.00	735 Iil. Comp. Stat. 5/12-1001 (a)
	Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit	
3.	(Subject to adju	ng a homestead exemption of stment on 4/01/199 and every 3		es filed on or after the date of adjustmen	t <b>.</b> )
	No Yes. Did you	u acquire the property covered l	by the exemption within	1,215 days before you filed this case?	
	☐ No ☐ Yes				

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 21 of Middle Name Last Name Document Page 21 of Middle Name Last Name

Part 2:	Additional	Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own		Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the va Schedule A	lue from /B	Check only	one box for each exemption		
Brief description:	JEWELRY	\$	5.00	<b>☑</b> \$	5.00	735 III. Comp. Stat. 5/12-1001 (b)	
Line from Schedule A/B:	<u>12</u>			100%	of fair market value, up to plicable statutory limit		
Brief description:	TCF BANK	\$	50.00	<b>2</b> \$		735 III. Comp. Stat. 5/12-1001 (b)	
Line from Schedule A/B;	<u>17</u>				of fair market value, up to plicable statutory limit		
Brief description:	FEDERAL TAX REFUND	\$	2000.00	<b>5</b> \$	2000.00	735 III. Comp. Stat. 5/12-1001 (b)	
Line from Schedule A/B:	28				of fair market value, up to plicable statutory limit		
Brief description:		\$		<b>Q</b> \$			
Line from Schedule A/B:					of fair market value, up to plicable statutory limit		
Brief description:		\$		<b>D</b> \$			
Line from Schedule A/B:					of fair market value, up to plicable statutory limit		
Brief description:		\$		<b>Q</b> \$	****		
Line from Schedule A/B:	***************************************				of fair market value, up to plicable statutory limit		
Brief description:		\$		<b>□</b> \$			
Line from Schedule A/B:	<del></del>	÷			of fair market value, up to plicable statutory limit		
Brief description:		\$		<b>0</b> \$	<del></del>		
Line from Schedule A/B:					of fair market value, up to plicable statutory limit		
Brief		•		□ s			
description: Line from Schedule A/B:		Ψ		☐ 100% c	of fair market value, up to plicable statutory limit		
Brief		\$		<b>3</b> s	,		
description: Line from Schedule A/B;		Ψ		☐ 100% c	of fair market value, up to blicable statutory limit		
Brief description:		\$		<b>O</b> s	·		
Line from Schedule A/B:	***************************************		The second secon	<b>1</b> 00% c	of fair market value, up to olicable statutory limit		
Brief description:		\$		<b>_</b> s			
Line from Schedule A/B:	<del></del>				of fair market value, up to plicable statutory limit		

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 22 of 60 Fill in this information to identify your case: JENNIFER M. REYES Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ☐ Check if this is an (If known) amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: **List All Secured Claims** Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Amount of claim Value of collateral Unsecured for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. that supports this Do not deduct the portion As much as possible, list the claims in alphabetical order according to the creditor's name. claim value of collateral If any 2.1 Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ZIP Code ■ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 2.2 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)

At least one of the debtors and another

Check if this claim relates to a

community debt

Date debt was incurred

0

Judgment lien from a lawsuit
Other (including a right to offset)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIC List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more sneeded, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show be nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more that unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)	Check if this is an mended filing
Debtor 2   Cape   Cap	
(Spouse, if filing) First Name	
Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIC List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do: A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do: A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do: A/B: Property (Official Form 106A/B) and on Schedule B: Creditors Who Have Claims Secured by Property. If more sneeded, copy the Part you need, fill It out, number the entries in the boxes on the left. Attach the Continuation Page to this page any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    Yes.	
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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIC List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more sneeded, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Ves.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show be nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more that unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority amount  Priority Creditor's Name  When was the debt incurred?  When was the debt incurred?	
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No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show be nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more that unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim  Priority Creditor's Name  When was the debt incurred?  Number Street	n <i>Schedule</i> not include any
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for e each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show be nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more that unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim  Priority Creditor's Name  When was the debt incurred?  Number Street	
Total claim  Priority Creditor's Name  Last 4 digits of account number  When was the debt incurred?	th priority and
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority amount  Priority Creditor's Name  When was the debt incurred?  Number Street	n hua prioritu
2.1 Priority Creditor's Name  Last 4 digits of account number  When was the debt incurred?  Number Street  Total claim Priority amount  When was the debt incurred?	Part 3.
2.1   Priority Creditor's Name   Last 4 digits of account number   \$ \$   \$	Nonpriority
Priority Creditor's Name  Last 4 digits of account number \$\$  When was the debt incurred?  Number Street	
Number Street When was the debt incurred?	\$
Number Street	
As of the date you file the claim to Obe the U.S.	
or the date you me, the claim is: Check all that apply.	
City State ZIP Code Contingent	
Who incurred the debt? Check one.	
Debtor 1 only	
Debtor 2 only  Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Domestic support obligations	
☐ Taxes and certain other debts you owe the government	i
Claims for death or personal injury while you were	:
Is the claim subject to offset? intoxicated  No Other. Specify	
Yes	
2	
Priority Creditor's Name  Last 4 digits of account number \$\$	\$
When was the debt incurred?	
Number Street  As of the date you file, the claim is: Check all that apply.	
Contingent	
City State ZIP Code Unliquidated	
Who incurred the debt? Check one.	1
Debtor 1 only	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 3 only ☐ Domestic support obligations	
- Patitor 1 and Deptior 2 only	1
intoxicated	
Is the claim subject to offset?  Other. Specify  Yes	to any service product of the service of the servic

Filed 02/19/19 Entered 02/19/19/11:01:17 Desc Main Document Page 24 of 60

List All of Your NONPRIORITY Unsecured Claims

dece					···	
3.	Do any creditors have nonpriority unsecured					
	No. You have nothing to report in this part. Su	ubmit this form	to the court with your other schedules.			
	<b>∠</b> Yes					
A	List all of your nonpriority unsecured claims in	n tha alababa	linal audou of the availtavb. bb.			11
٧.	nonpriority unsecured claim, list the creditor sepa	rately for each	claim. For each claim listed, identify who	each claim. If a creditor has	s more	than one
	included in Part 1. If more than one creditor holds	a particular cl	aim, list the other creditors in Part 3.If vo	ou have more than three no	noriori	tv unsecured
	claims fill out the Continuation Page of Part 2.	•				.,
					384488	systema si sa
	า				Tot	al claim
1	ALLIANT CU		Last 4 digits of account number	8728		457.00
	Nonpriority Creditor's Name	·······			\$	<u> 157.00</u>
	POB 66945		When was the debt incurred?	<u>10/13/20</u> 16		
	Number Street		Provide discussion			
	CHICAGO	60666				
	City State	ZiP Code	As of the date you file, the claim	is: Check all that apply.		
			☐ Contingent			
	Who incurred the debt? Check one.		Unliquidated			
	☑ Debtor 1 only		Disputed			
	Debtor 2 only		□ Dispoted			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecu	ırad elaim:		
	At least one of the debtors and another			n eu ciann.		
			Student loans			
	Check if this claim is for a community debt		Obligations arising out of a sepa	ration agreement or divorce		
	Is the claim subject to offset?		that you did not report as priority  Debts to pension or profit-sharing			
	☑ No		Other. Specify OTHER	g plans, and other similar debts	3	
	☐ Yes		Cirler. Specify OTTICIT	······		
2	BIG PICTURE LOANS		Last 4 digits of account number	UNKNOWN	\$	900.00
	Nonpriority Creditor's Name		When was the debt incurred?	2017	Ψ	000.00
	P.O. BOX 784		The state of the dest modified i	<u> </u>		
	Number Street					
	WATERSMEET MI	49969	As of the date you file, the claim	is: Check all that apply.		
	City State	ZIP Code	<del> </del>	.,,		
			Contingent			
	Who incurred the debt? Check one.		Unliquidated			
	Debtor 1 only		☐ Disputed			
	Debtor 2 only		Time of MONDBIODITY			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecu	irea ciaim:		
	At least one of the debtors and another		Student loans			
	☐ Check if this claim is for a community debt		Obligations arising out of a separ	ration agreement or divorce		
	·		that you did not report as priority	claims		
	Is the claim subject to offset?		Debts to pension or profit-sharing	plans, and other similar debts		:
	☑ No		Other, Specify PAYDAY LO	JAN		
	Yes					
, ]	вког AMER	4-1		en en proprietation de la company de la comp	2,700,000,000,000,000	er de Cardinación en conservan escalación de propieto de la confesión de la confesión de la confesión de la co
	Nonpriority Creditor's Name		Last 4 digits of account number		\$	526.00
	POB 15026		When was the debt incurred?	<u>04/10/20</u> 15	Ψ	<u> </u>
	Number Street		<del></del>			
	WILMINGTON DE	19801				
	City State	ZIP Code	—— As of the date you file, the claim	is: Check all that apply.		
			Contingent			
	Who incurred the debt? Check one.		Unliquidated			
	Debtor 1 only		Disputed			
	Debtor 2 only		Capatea			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecu	and claim:		
	At least one of the debtors and another		****	reu cidini:		
	Chook if this staim is to		Student loans			
	☐ Check if this claim is for a community debt		Obligations arising out of a separ	ation agreement or divorce		
	Is the claim subject to offset?		that you did not report as priority  Debts to pension or profit-sharing			
	☑ No		== = = = = = = = = = = = = = = = = = =			
	☐ Yes		Other, Specify <u>CREDIT CA</u>	עט		

# First Name Middle Name Document Page 25 of 60

Part 2:

Aft	er listing any entries on this pag	e, number the	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
4.4	CAPITAL ONE			Last 4 digits of account number UNKNOWN	700.00
	Nonpriority Creditor's Name			_	\$ 700.00
	P.O. BOX 60			When was the debt incurred? 2015	
	Number Street	·····			
	ST. CLOUD	MN	56302	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check on	^		Unliquidated	
	_	<del>u</del> .		☐ Disputed	
	Debtor 1 only Debtor 2 only			T. (NAUSDISSIS)	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and an	other		Student loans	
				Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a cor	mmunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify CREDIT CARDS	
	☑ No			_ Onto, opoday	
	Yes				
1.5	CAPITAL ONE	\$50 miles (1997 - 1994 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1		Last 4 digits of account number UNKNOWN	s 700.00
	Nonpriority Creditor's Name			Lust 4 digita of Boodaft Hullipel	\$ 700.00
	P.O. BOX 60			When was the debt incurred? 2012	
	Number Street				
	ST. CLOUD	MN	56302	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	MAN TO THE PARTY OF THE PARTY O			Unliquidated	
	Who incurred the debt? Check one	€.		☐ Disputed	
	Debtor 1 only			·	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and and	other		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a con	nmunity debt		you did not report as priority claims	
				Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify CREDIT CARDS	
	Ø №				
.6	**************************************	t den de de de serventjust i energier (energier (energier (energier (energier (energier (energier (energier (e	live de três met in term meg três gjilmen protes gelêkel y seet trime de 20 de 18 met de des desse		t is described to the second s
ت	CAPITAL ONE			Last 4 digits of account number 3492	\$ <u>423.00</u>
	Nonpriority Creditor's Name		***************************************	— Cast 4 digits of account number OFOL	
	11013 W BROAD ST			When was the debt incurred? 10/03/2018	
	Number Street GLEN ALLEN	VA	23060	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one	•		Unliquidated	
	Debtor 1 only	••		☐ Disputed	
	Debtor 1 only  Debtor 2 only			Town of MONBOIGNIES	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and and	othar		Student loans	
				Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a con	nmunity debt		you did not report as priority claims	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other, Specify CREDIT CARD	
	Ø No			Ouse, Specify Street, Oracle	
	Yes				

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Part 2:

After listing any entries on this page	e, number the	em beginning wi	th 4.4, followed by 4.5, and so forth.		Total claim
CARL E HILL			Last 4 digits of account number	UNKNOWN	s 155.6
Nonpriority Creditor's Name			Minet develope		\$ <u>100.00</u>
841 DODGE AVENUE			When was the debt incurred?	<u>2018</u>	
Number Street			<del></del>		
EVANSTON	IL	60202	As of the date you file, the claim	is: Check all that apply.	
City	State	ZIP Code	☐ Contingent		
			Unliquidated		
Who incurred the debt? Check one	3.		☐ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecur	ed claim:	
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and an	other		Obligations arising out of a separation	ration agreement or diverse that	
Check if this claim is for a cor	anna constant alla la f		you did not report as priority clair	nation agreement or divorce that	
Check if this claim is for a cor	minunity dept		Debts to pension or profit-sharing		
Is the claim subject to offset?			Other, Specify MEDICAL		
☑ No				771100111111111111111111111111111111111	
Yes					
TO SECURE A SECURITION OF THE SECURITIES OF THE	A SANSAN (Austria (SA SA SANSAN SA SANSA	tik tipikkii tili jällä kaisikii sikeikeikeikeen valiken ettoka avatorta.	Last 4 digits of account number	PASO	s 499.00
CAVALRY PORT				<u></u>	\$ <u>433.00</u>
Nonpriority Creditor's Name			When was the debt incurred?	08/23/2016	
500 SUMMIT LAKE DRIVE SUITE 400				<u> </u>	
Number Street VALHAŁLA	4.07		As of the date you file, the claim	is: Check all that apply.	
City	NY	10595		and a pp.,	
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one	1		Unliquidated		
Debtor 1 only	•		☐ Disputed		
Debtor 2 only			-		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	ed claim:	
			Student loans		
At least one of the debtors and and	other		Obligations arising out of a separ	ration agreement or divorce that	
Check if this claim is for a con	nmunity debt		you did not report as priority clain	ns	
	<b>,</b>		Debts to pension or profit-sharing	plans, and other similar debts	
Is the claim subject to offset?			Other. Specify COLLECTION	<u>N</u>	
☑ No					
☐ Yes					
CAVALRY PORTFOLIO SERVICES			Last 4 digits of account number	UNKNOWN	\$ 500.00
Nonpriority Creditor's Name			—		
500 SUMMIT LAKE DRIVE			When was the debt incurred?	2013	
Number Street VALHALLA	NY	10595	As of the date you file, the claim	is: Check all that apply.	
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one			Unliquidated		
	•		☐ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecure	ed claim:	
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and and	other		Obligations arising out of a separa	ation agreement or divorce that	
☐ Check if this claim is for a com	munity deht		you did not report as priority claim	าร	
	amainty don't		Debts to pension or profit-sharing	plans, and other similar debts	
Is the claim subject to offset?			Other, Specify CREDIT CAF	RDS	
Ø No				- THE TWINING A STATE OF THE ST	
☐ Yes					

# EASHFER M4369 ESOC 1 Filed 02/19/19 Entered 02/19/19 01:17 Desc Main First Name Document Page 27 of 60

Part 2:

Afte	er listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.10	COMED	Last 4 digits of account number UNKNOWN	900.00
	Nonpriority Creditor's Name	-	\$ <u>800.00</u>
	P.O. BOX 805379	When was the debt incurred? 2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	CHICAGO         IL         60680           City         State         ZiP Code		
	Who incurred the debt? Check one.	☐ Contingent☐ Unliquidated☐ Disputed	·
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	:
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	:
	Is the claim subject to offset?	Other. Specify UTILITIES	
	☑ No □ Yes		1
4.11			
runuuul	DPT ED/NAVI	Last 4 digits of account number 0623	<sub>\$</sub> 3596.00
	Nonpriority Creditor's Name PO BOX 9635	When was the debt incurred? 09/08/2014	:
	Number Street	- Water Area de Communicación de Communi	
	WILKES BARRE PA 18773	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	<u> </u>
	☐ Check if this claim is for a community debt	you did not report as priority claims	1
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	:
	☑ No	Curier: Specify	
	☐ Yes		į
4.12			s 4830.00
	DPT ED/NAVI	Last 4 digits of account number 0623	\$
	PO BOX 9635	When was the debt incurred? $09/08/2014$	
	Number Street WILKES BARRE PA 18773	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	!
		Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	¥ 1
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	Man of the
	Is the claim subject to offset?	Other, Specify	10 mg
	☐ Yes		

Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main

Document Page 28 of 60

Part 2:

listing any entries on this	page, number ther	n beginning wit	h 4.4, followed by 4.5, and so forth.	Total clair
FINGERHUT			Last 4 digits of account number UNKNOWN	s 300.0
Nonpriority Creditor's Name 6250 RIDGEWOOD ROAD			When was the debt incurred? 2014	\$ <u></u>
Number Street			MANUE	
ST. CLOUD	MN	56303	As of the date you file, the claim is: Check all that apply.	
City  Who incurred the debt? Check  Debtor 1 only	State k one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors an	d another		Obligations arising out of a separation agreement or divorce	e that
Check if this claim is for a	community debt		you did not report as priority claims	
is the claim subject to offset?  No	-		☐ Debts to pension or profit-sharing plans, and other similar d ☐ Other. Specify PRODUCT	ebts
Yes	TO THE CONTROL OF THE STATE OF	MARTIN SONO SONO SONO SONO SONO SONO SONO SO		
FIRST NATIONAL			Last 4 digits of account number UNKNOWN	s 500.0
Nonpriority Creditor's Name			· · · ·	<u>, 000.0</u>
500 EAST 60TH STREET NORTH			When was the debt incurred? 2014	
Number Street			An of the date was file the status to an investment	
SIOUX FALLS	SD	57104	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	cone.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and	d another		Student loans  Obligations arising out of a separation agreement or divorce	
☐ Check if this claim is for a community debt			<ul> <li>Obligations arising out of a separation agreement or divorce you did not report as priority claims</li> </ul>	that
	•		Debts to pension or profit-sharing plans, and other similar de	ebts
s the claim subject to offset?			☑ Other, Specify CREDIT CARDS	
⊠ No				
☐ Yes				
The Bartle Williams Line Sementers part of the Part of the Bartle Security	ા જત્મ કરવા છે. મહિલ ૧૧૦ માટે સાથે અને પ્રતિકારો અને અને હતું કહેલ્લી અલ્લાદ્રાત કે મહાના મહતું કરણા અને કરે છ 	erricular och statement glanderede gegantisten er erstansta er statement zu erstatten et zu en statement zu er		s_502.0
FNCC lonpriority Creditor's Name			Last 4 digits of account number 0669	
500 EAST 60TH ST NORTH			When was the debt incurred? 05/17/2015	
lumber Street			<del></del>	
SIOUX FALLS	SD	57104	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
Vho incurred the debt? Check	one.		Disputed	
Debtor 1 only			- ···	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	l another		Obligations arising out of a separation agreement or divorce	that
Check if this claim is for a	community debt		you did not report as priority claims	
s the claim subject to offset? No Yes	-		□ Debts to pension or profit-sharing plans, and other similar de Other. Specify CREDIT CARD	bts

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Document Page 29 of 60

Part 2:

er listing any entries on this p	page, number the	em beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
FST PREMIER			Last 4 digits of account number 3513	s 517.00
Nonpriority Creditor's Name			00/00/0045	\$ 017.00
3820 N LOUISE AVE			When was the debt incurred? $03/28/2015$	
Number Street			As of the data you file the claim in Charle II that such	
SIOUX FALLS	SD	57107	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one		Unliquidated	
	COIIE.		☐ Disputed	
✓ Debtor 1 only ☐ Debtor 2 only			- (15)	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	i anathar		Student loans	
At least one of the deptors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	
☑ No			Other, Specify CITEDIT CAILD	
Yes				
(1999) dis Million (18 dine 18	THE STATE OF THE S			\$\$\$\$\$\$\dag{\text{2}}\$
JEFFERSON CAPITAL SYSTEMS, LLC	C		Last 4 digits of account number 2003	s 258.00
Nonpriority Creditor's Name				<b>*</b>
P.O. BOX 772813			When was the debt incurred? $05/30/2017$	
Number Street		***************************************		
CHICAGO	IL	60677-2813	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
	community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify COLLECTION	
☑ No				
☐ Yes				
т терен же	ggi fe friedrich feit (Seitz) og 12 filiú fra þei sveik (Seit Seit Seit Seit Seit Andríke veljeng)	ili de et Palaite (1990-leis de la 18 et ille dipendententen et medien et pension dipensión es dipensión es d		s 600.00
JTM CAPITAL			Last 4 digits of account number UNKNOWN	
Nonpriority Creditor's Name			When was the debt incurred? 2016	
6400 SHERIDAN DRIVE			- Milen was the dept inculred? ZO 10	
Number Street WILLIAMSVILLE	NY	14221	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	community debt		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			LA Orban Chank, LHCP(III CARI)	
Is the claim subject to offset?  ☑ No			Other. Specify CREDIT CARD	

<u> </u>	er listing any entries on this page, number	them beginning wit	h 4.4, followed by 4.5, and so forth.		Total claim
4.19	LVNV FUNDING		Last 4 digits of account number	8745	s 652.00
	Nonpriority Creditor's Name C/O RESURGENT CAPITAL SERVICES PO BOX 1269			11/22/2017	\$ <u>002.00</u>
:	Number Street GREENVILLE SC	29602	 As of the date you file, the claim	is: Check all that apply.	
	City State  Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated Disputed		
: : :	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	oo oann.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community de Is the claim subject to offset? ☑ No ☐ Yes	bt	<ul> <li>Obligations arising out of a sepa you did not report as priority clair</li> <li>Debts to pension or profit-sharing</li> <li>Other. Specify COLLECTION</li> </ul>	ms g plans, and other similar debts	
4.20	терительного в объектерительного при	että vaitetta pieteettä kohtaatai tävistä täyttä tietettä vaitettiinikki kunkuu saaguse	Last 4 digits of account number	-advitable from maximum consistence of the state of the consistence of the state of the consistence of the state of the s	<sub>\$</sub> 814.00
	MI/BMOHARRIS Nonpriority Creditor's Name		Last 4 digits of account number		\$014.00
	PO BOX 1111		When was the debt incurred?	<u>01/20/20</u> 15	
	Number Street MADISON WI	53701	<ul> <li>As of the date you file, the claim</li> </ul>	is: Check all that apply.	
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed		
	Debtor 1 only Debtor 2 only		Turns of NONDBIODITY was some	المناعلة المالية	:
	Debtor 1 and Debtor 2 only		Type of <b>NONPRIORITY</b> unsecur  Student loans	ed claim;	:
	At least one of the debtors and another		Obligations arising out of a separ		
	Check if this claim is for a community del	bt	you did not report as priority clair  Debts to pension or profit-sharing		
	Is the claim subject to offset?  No Yes		Other. Specify CREDIT CA	RD	
4.21	PRES STOCK by the Manufacture of Control of	900-03 ettilisis di kanifiyat kaishanifa ojumuankan iku-ma ki kanifisti ji ja tusiyopis ojohisis ji	Last 4 digits of account number	6751	<u>\$ 765.00</u>
	PORTFOLIO RECOVERY ASSOCIATES, LLC Nonpriority Creditor's Name		Last 4 digits of account number	· ·····	
	120 CORPORATE BLVD		When was the debt incurred?	<u>12/21/20</u> 17	
	Number Street NORFOLK VA	23502	As of the date you file, the claim	is: Check all that apply.	
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecure	ed claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separ	ation agreement or divorce that	
	Check if this claim is for a community del	ot	you did not report as priority claim  Debts to pension or profit-sharing		
	Is the claim subject to offset? ☑ No ☑ Yes		Other. Specify COLLECTIO	N	Access to 1970 and 19

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Part 2:

- 4, 20	er listing any entries on this page, nu	mvel uit	an beginning Wit	ii 4.4, lulluwed by 4.5, and 50 forth.		Total claim
4.22	PRESENCE MEDICAL GROUP			Last 4 digits of account number	UNKNOWN	s 78.62
	Nonpriority Creditor's Name		1700000-11-1	<del>_</del>		\$ <u>10.02</u>
	62314 COLLECTIONS DRIVE			When was the debt incurred?	2018	
	Number Street			— As of the date you file, the claim	is: Check all that apply	
	CHICAGO	IL. State	60693 ZIP Code		ita. Oneok ali triat appriy.	
	Спу	State	ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one.			Disputed		
	Debtor 1 only			- Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecur	red claim;	
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			Obligations arising out of a separ	ration agreement or divorce that	
	☐ Check if this claim is for a commun	nity debt		you did not report as priority clair	ทร	
	Is the claim subject to offset?	-		Debts to pension or profit-sharing	g plans, and other similar debts	
	☑ No			Other, Specify MEDICAL	**************************************	
	☐ Yes					
4.23	mente en retaria mente entre del del descriptorio de escolo de esta desta del consessione de entre en consessi O CONTROLLES O CONT	· v. do a do diva fino per pergapero y copies	and a first to the Constituting American part Angelegen Angelegen (Angelegen Constitution Angelegen Angelegen		and the second and the second accordance and the second accordance and the second accordance as the second accordance acc	s 459.00
	PROFBURCOL Nonpriority Creditor's Name			Last 4 digits of account number	3/3!	\$ <u>439.00</u>
	5295 DTC PARKWAY			When was the debt incurred?	04/16/2018	
	Number Street			<del></del>	1-44-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
	GREENWOOD VILLAGE	со	80111	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZiP Code	☐ Contingent		
	Shift of the control			Unliquidated		
	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only					
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecure		
	At least one of the debtors and another			Student loans		
				Obligations arising out of a separ		
	Check if this claim is for a commun	ity debt		you did not report as priority clain  Debts to pension or profit-sharing		
	Is the claim subject to offset?			Other. Specify COLLECTIO		
	☑ No					
	Yes					
	arrayon (Sa etc.) Sa testione en plans involved and street and shall contribute the state of the state of the same of the same of the street and the state of the same of the same of the street and the same of t	er til desset der Schlieber Gescher Consch	than the state on the contribution of the state of the st	1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +	erde vendreit de 1997 (spelligen van de stronde stade is het herde frijzent kold sei beste stade is met de skanh veder angewed van een g	ertenin impiasumminerummus tomatus inicatus ann.
	Nonpriority Creditor's Name			Last 4 digits of account number		<u> </u>
				When was the debt incurred?		
	Number Street			As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		:
	Debtor 2 only			Type of NONDBIODITY was a sur-		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecure	eu ciaim;	
	At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a separa you did not report as priority claim	18	
	Is the claim subject to offset?			Debts to pension or profit-sharing		
	□ No □ Yes			Other. Specify		1

Filed 02/19/19

Entered 02/19/19/11/101:17 Desc Main

Page 32 of 60

0.00

10806.30

19232.30

Part 4:

similar debts

Write that amount here.

6j. Total. Add lines 6f through 6i.

6i. Other. Add all other nonpriority unsecured claims.

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
* 4	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$	8426.00
	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other			

6h.

6j.

		Case 19-043	09 D	oc 1	Filed 02/19/19		/19/19 11:01:17	Desc Main
Fi	ll in this i	nformation to identi	ify your c	ase:	- Document	Page 33 of 6	0	
		JENNIFER M. F	PEVES					
De	ebtor	First Name		le Name	Last Name			
	ebtor 2 pouse If filing)	First Name	Midd	lie Name	Lest Name			
Ur	nited States	Bankruptcy Court for the	<sub>e</sub> . NORT	HERN DI	STRICT OF ILLING	ois		
]	sse number							
	known)							☐ Check if this is ar amended filing
		orm 106G						
S	ched	ule G: Exe	cuto	ry Co	ontracts a	nd Unexpi	ired Leases	12/15
into add	Do you h No. C Yes.	If more space is nee ges, write your nam have any executory theck this box and file Fill in all of the inform trately each person , rent, vehicle lease,	eded, cop ne and ca: contracts e this form nation belo or compa	y the addi se number s or unexp n with the co ow even if it	itional page, fill it our (if known).  ired leases?  ourt with your other so the contracts or lease	t, number the entries chedules. You have a s are listed on Sched	nothing else to report or dule A/B: Property (Offic	s page. On the top of any
	Person o	r company with wh	om you h	nave the c	ontract or lease	State v	vhat the contract or le	ase is for
2.1	HASTII Name	NGS				RENT		
		MADISON STREE	ET					
	Number	Street		00000				
	EVANS City	STON I	L State	60202 ZIP Code	***************************************			
2.2		NA PARAMETER (STATE OF THE STATE OF THE STAT	entre tradition are inspiring a project		an to the tier the tight good follows on the large in the most think to the fill had time for	er en de men en en de mende foret de fort de foret de foret de la company de mende de de se	and the second second and the second	er der die der internationalister (optionalister) beginning ver der der der der der der der der der d
i								
	Name							
	Number	Street	······	***************************************				
	City		State	ZIP Code		20170070010u40		
2.3	-8-4-29-4-2002-00-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	empire a single massing records of a single commensurable of a minimum of a	en in the extendents of magnetic growns and	amende kankant garantaga daga galang alah gang	an yan wan en maran gan gang raba saba saba ngang yesi meng epin saba ne na saba saba s	the first of five first and a secure securities securities and reported the first of five first medical medical mass	emininte distribution in a transmisseramente distribution de section se de la section de de la companya de la c	era silinda al la mendenenga e energina malaya na tan danuna dan danunaman yantan dadin dan dan una pepunan per
	Name					**************************************		
	Number	Street	~~~					
Jack Wheel door	City		State	ZIP Code				
2.4			enter e tempera de completo, qui principio e de	u - u n'a Militara Birgular paginti (15)	an in ne ant a new Ederwijsberg 6 686 feathwester 5 6 feath 56 seft fan 18 seft feath 6 seft f	androphilip Africa of Princes, is his edition on princip nationalizing Leapung (1975), in given	entita eta en a martin eta eta eta eta eta eta eta en en esta eta en en en eta en eta eta eta eta esta esta et	
	Name					··············		
	Number	Street						
						<del></del>		
	City		State	ZIP Code				

	Case 19-04309	Doc 1	=iled 02/19/19	Entered 02/19	/19 11:01:17	Desc Main
Fill in th	nis information to identify yo	our case:		<b>Depart 1</b> of 60		
Debtor 1	JENNIFER M. REY	ES				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if	filling) First Name	Middle Name	Last Name	<u></u>		
United Sta	ates Bankruptcy Court for the: N	ORTHERN DI	STRICT OF ILLINOI	s		
Case num	nber			i I		
(If known)						Check if this is an
						amended filing
Officia	al Form 106H					
Sche	dule H: Your (	Codebto	ors			12/15
1. Do you within Arizor	together, both are equally roper the entries in the boxes ober (if known). Answer ever but have any codebtors? (if you	esponsible for on the left. Attary question.  You are filing a journal lived in a comman, Nevada, Newspouse, or legal tate or territory of	supplying correct inforch the Additional Pay bint case, do not list eit munity property state Mexico, Puerto Rico, equivalent live with you	permation. If more space to this page. On the the spouse as a codebiner spouse as a code	e is needed, copy to top of any Addition or.)  or.)  nity property states a d Wisconsin.)	i
	Number Street		00-11-00-10-10-10-10-10-10-10-10-10-10-1			
	City	State		ZIP Code		
show Sche Sche	lumn 1, list all of your codel in in line 2 again as a codeb dule D (Official Form 106D), dule E/F, or Schedule G to f umn 1: Your codebtor	tor only if that Schedule E/F	person is a guaranto (Official Form 106E/F	r or cosigner. Make su ), or Schedule G (Offic	ire you have listed i ial Form 106G). Us	the creditor on
				Ch	eck all schedules that	at apply:
3.1	······································				Schedule D, line _	
Nam	10				Schedule E/F, line	
Num	nber Street				Schedule G, line	· · · · · · · · · · · · · · · · · · ·
City		State	9	ZIP Code		
3.2				p		
Nam	ne .				Schedule D, line _	
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City					Jonedule G, Inie	TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT
3.3		State	3	ZIP Code		
Nam	le		Water William Control of the Control	<b>_</b>	Schedule D, line	
B. 6	0				Schedule E/F, line	:
Num	iber Street				Schedule G, line	**************************************
City		State	<b>)</b>	ZIP Code		nter en

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 35 of 60 Document Fill in this information to identify your case: JENNIFER M. REYES Debtor 1 Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number Check if this is: (If known) An amended filing A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Employment** 1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job, attach a separate page with **Employment status** Employed Employed information about additional employers. Not employed Not employed Include part-time, seasonal, or self-employed work. Occupation Occupation may include student or homemaker, if it applies. UNITED AIRLINES Employer's name Employer's address 10000 WEST OHARE AVENUE Number Street Number Street **CHICAGO** П 60666 State ZIP Code City ZIP Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. 0.00 0.00 3. Estimate and list monthly overtime pay. Calculate gross income. Add line 2 + line 3. 0.00

Case 19-04309 Doc 1

Middle Name

Filed 02/19/19

Entered 02/19/19 11:01:17

Desc Main

Debtor 1

JENNIFER M. REYES

Document

Page 36 of 60 Case number (# known)

For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. Indicate whether you have the payroll deductions below: 0.00 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 0.00 5c. 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 5e. Insurance 5e. 0.00 5f. Domestic support obligations 5f. 0.00 5q. 5g. Union dues 0.00 5h. 5h. Other deductions. Specify: 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 8. List all other income regularly received: 50.00 8a. Net income from rental property and from operating a business, 8a. profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 8b. Interest and dividends 500.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 900.00 8d. Unemployment compensation 8e. Social Security 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps or housing subsidies Specify (Debtor 1): Specify (Debtor 2 or Non-Filing Spouse): SNAP 200.00 8g. Pension or retirement income 0.00 8h. Other monthly income. Specify (Debtor 1): Specify (Debtor 2 or Non-Filing Spouse): 0.009. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 1650.00 10. Calculate monthly income. Add line 7 + line 9. 0.00 1650.00 1650.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. ARLENE PAPPAS Specify: 11, 🛨 200.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1850.00 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined 12. Do you expect an increase or decrease within the year after you file this form? monthly income ☑ No. Yes. Explain:

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Fill in this information to identify your case: JENNIFER M. REYES Debtor 1 Last Name Check if this is: Debtor 2 (Spouse, if filing) First Name Last Name An amended filing United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS ☐ A supplement showing postpetition chapter 13 income as of the following date: (If known) MM / DD / YYYY Attachment on Additional Employment/Businesses 12/15 Fill in information about your Name of second business, if any additional sole proprietorship business Number Street City State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(518)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above Fill in information about Debtor 1 your additional Debtor 2 or non-filing spouse employments 2. Occupation UNITED AIRLINES Employer's name Employer's address 10000 WEST OHARE AVENUE Number Street Number Street **CHICAGO** IL 60666 State ZIP Code City State ZIP Code How long employed there? **SELL USED CLOTHES** 3. Occupation Employer's name SELF-EMPLOYED Employer's address Number Street Number City State ZIP Code City State ZIP Code How long employed there? 2 MONTHS

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 38 of 60

Fill in this information to identif	y your case:				
Debtor 1 JENNIFER M. RI	EYES				
First Name Debtor 2	Middia Name Last Name		if this is:		
(Spouse, if filing) First Name	Middle Name Last Name		amended f	-	
United States Bankruptcy Court for the	NORTHERN DISTRICT OF ILLIN			showing post of the following	tpetition chapter 13 g date:
Case number (If known)			DD / YYY		
Official Form 106J					
Schedule J: Yo	ur Expenses				12/15
Be as complete and accurate as prinformation. If more space is need (if known). Answer every question Part 1: Describe Your Ho		ng together, both are equal i. On the top of any additior	ly respons ial pages, v	ible for supply write your nam	ring correct se and case number
1. Is this a joint case?					
No. Go to line 2.  Yes. Does Debtor 2 live in a	separate household?				
☐ No ☐ Yes. Debtor 2 must f	ile Official Form 106J-2, Expenses for S	eparate Household of Debtor	· 2.		
2. Do you have dependents?	□ No	e eta eta errena er		***************************************	North According to Million Control of the Control o
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	benishris soburisciar	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		CHILD	<u> </u>	11	No Yes
			<del></del> .		□ No
					☐ Yes
					U No □ Yes
					□ No
					☐ Yes
			<del></del> -		□ No
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes		111/2 111/2		☐ Yes
	ing Monthly Expenses	e tori contrate contrate i torio e statue e que e a se se en en el contrate e que e el contrate e que e el cont		***************************************	Succession of the adversary succession of the con-
Estimate your expenses as of you	r bankruptcy filing date unless you a nkruptcy is filed. If this is a suppleme	re using this form as a suppental Schedule J, check the	olement in box at the	a Chapter 13 o top of the form	ase to report
Include expenses paid for with no	n-cash government assistance if you	know the value of			
	d it on Schedule I: Your Income (Offic			Your expe	nses
<ol> <li>The rental or home ownership any rent for the ground or lot.</li> </ol>	expenses for your residence. Include	first mortgage payments and	4.	\$	875.00
If not included in line 4:					
4a. Real estate taxes			4a.	\$	0.00
4b. Property, homeowner's, or			4b.	\$	0.00
4c. Home maintenance, repair,	,		4c.	\$	0.00
4d. Homeowner's association of	or condominium dues		4d.	\$	0.00

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 39 of 60 Document

JENNIFER M. REYES Debtor 1

Case number (# known)\_

Your expenses 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. 6. Utilities: 6a. Electricity, heat, natural gas 200.00 6a Water, sewer, garbage collection 100.00 6b. Telephone, cell phone, Internet, satellite, and cable services 6c. 180.00 6c. Other. Specify: 6d 0.00 6d. 7. Food and housekeeping supplies 250.00 7. Childcare and children's education costs 160.00 Clothing, laundry, and dry cleaning 200.00 10. Personal care products and services 100.00 Medical and dental expenses 150.00 Transportation. Include gas, maintenance, bus or train fare. 100.00 Do not include car payments. 12 Entertainment, clubs, recreation, newspapers, magazines, and books 140.00 13. Charitable contributions and religious donations 20.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 0.00 15a. 15b. Health insurance 0.00 15b. 15c. Vehicle insurance 0.00 15c. 15d. Other insurance. Specify:\_ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 Specify: \_ 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a 17b. Car payments for Vehicle 2 17c. Other, Specify: 17d. Other. Specify:\_ 17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 0.00 Other payments you make to support others who do not live with you. 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 0.00 20a 20b. Real estate taxes 0.00 20b. 20c. Property, homeowner's, or renter's insurance 0.00 20c. 20d. Maintenance, repair, and upkeep expenses 0.00 20d. 20e. Homeowner's association or condominium dues 0.00 20e.

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 40 of 60 JENNIFER M. REYES Debtor 1 Case number (# known) Middle Name 21. Other. Specify: \_ 0.00 21. 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 2475.00 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c 2475.00 23. Calculate your monthly net income. 1850.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 2475.00 23b. 23c. Subtract your monthly expenses from your monthly income. -625.00 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Explain here:

Entered 02/19/19 11:01:17 Case 19-04309 Doc 1 Filed 02/19/19 Desc Main Page 41 of 60 Document Fill in this information to identify your case: JENNIFER M. REYES Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS (If known) Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No No Yes. Name of person . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119), Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

Signature of Debtor 2

MM / DD / YYYY

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Document Page 42 of 60 Fill in this information to identify your case: JENNIFER M. REYES Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) ☐ Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? □ No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2: **Dates Debtor 2** lived there lived there Same as Debtor 1 Same as Debtor 1 4842 ELM STREET From Number Number Street APT 1 **EVANSTON** 60202 City State ZIP Code City State ZIP Code Same as Debtor 1 ☐ Same as Debtor 1 From From \_\_\_ Number Street Number Street To City State ZIP Code State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

**Y** No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

**Explain the Sources of Your Income** 

Case 19-04309

Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 43 of 60

Debtor 1

ENIN	ICCD	8.4	REYES	
JENN	IrEK	IVI.	KEYES	

PENNIAL		KE	IEC
F1-4 M	10.10		***************************************

ø	Name	Lest	N

Name

Case number (if known)\_\_

Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have income	d from all jobs and all busi	nesses, including part-tir	ne activities.	endar years?
₩ No				
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$0	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	\$O	Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2018	Operating a business		Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips	<b>\$</b> 0	Wages, commissions, bonuses, tips	
(January 1 to December 31, $\frac{2017}{\gamma\gamma\gamma\gamma}$ )	Operating a business	<b>a</b>	Operating a business	\$
unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ents; pensions; rental inco a joint case and you have	ome; interest; dividends; income that you receive	ed together, list it only once	suits; royalties; and
	ents; pensions; rental inco a joint case and you have ach source separately. Do	ome; interest; dividends; income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and
gambling and lottery winnings. If you are filing List each source and the gross income from e	ents; pensions; rental inco a joint case and you have	ome; interest; dividends; income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
gambling and lottery winnings. If you are filing List each source and the gross income from e	ents; pensions; rental inco a joint case and you have ach source separately. Do	ome; interest; dividends; income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and
gambling and lottery winnings. If you are filing List each source and the gross income from e  You Yes. Fill in the details.	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income	sults; royalties; and a under Debtor 1.  Gross income from each source (before deductions and
gambling and lottery winnings. If you are filing List each source and the gross income from e	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	sults; royalties; and a under Debtor 1.  Gross income from each source (before deductions and
gambling and lottery winnings. If you are filing List each source and the gross income from e  You Yes. Fill in the details.  From January 1 of current year until	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	sults; royalties; and a under Debtor 1.  Gross income from each source (before deductions and
gambling and lottery winnings. If you are filing List each source and the gross income from e  You Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
gambling and lottery winnings. If you are filing List each source and the gross income from each No  Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  \$\[ \] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.	sults; royalties; and a under Debtor 1.  Gross income from each source (before deductions and
gambling and lottery winnings. If you are filing List each source and the gross income from e  You Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
gambling and lottery winnings. If you are filing List each source and the gross income from each No  Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  \$\[ \] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
gambling and lottery winnings. If you are filing List each source and the gross income from each No  Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  \$\frac{1}{2}  (by the content of the co	money collected from laws ed together, list it only once to you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
gambling and lottery winnings. If you are filing List each source and the gross income from e  You Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year: (January 1 to December 31, 2018)	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions)  \$\[ \] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$	money collected from laws ed together, list it only once to you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
gambling and lottery winnings. If you are filing List each source and the gross income from each No Area. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2018)	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions)  \$\[ \] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$\] \$	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)

Case 19-04309 Doc 1

Filed 02/19/19 Document

Entered 02/19/19 11:01:17 Desc Main Page 44 of 60

Debtor 1

JENNIFER M. REYES
First Name Middle Name

Last Name

Case number (if known)\_

Part 3:	List Certain Payments You Made Before	re You Filed	l for Bankruptcy		
6. Are eith	ner Debtor 1's or Debtor 2's debts primarily c	onsumer deb	ts?		
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a person	nal, family, or I	household purpose."		1(8) as
	During the 90 days before you filed for bankru	ptcy, did you p	pay any creditor a total of	f \$6,425* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. Do child support and alimony. Also, do not	o not include p	payments for domestic si	upport obligations, such as	
	* Subject to adjustment on 4/01/19 and every 3				
☑ Yes	. Debtor 1 or Debtor 2 or both have primarily	consumer de	shte		
	During the 90 days before you filed for bankrup			\$600 or more?	
		noj, ala joa p	ay arry ordanor a total or	4000 of more;	
	No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include paymen	domestic supr	ort obligations, such as	child support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
			\$	\$	
	Creditor's Name	*	**************************************	Ψ	☐ Mortgage
					Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				<b>O</b> ther
				* * * * * * * * * * * * * * * * * * * *	
			\$	<b></b> \$	Mortgage
	Creditor's Name				Car
					Credit card
	Number Street				
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
				e e e e e e e e e e e e e e e e e e e	
			\$	¢	<b></b>
	Creditor's Name		Ψ	_ <b>3</b>	Mortgage
					Car
	Number Street	4744			Credit card
					Loan repayment
		<del></del>			☐ Suppliers or vendors
	City State ZIP Code				Other

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 45 of 60 JENNIFER M. REYES

Case number (if known)\_

Debto	r 1

nsiders include your relative corporations of which you a agent, including one for a bauch as child support and a	are an officer, director, pers ousiness you operate as a s	relatives of any son in control, o	general partners; <sub>l</sub> r owner of 20% or	partnerships of whice more of their voting	who was an insider? th you are a general partner; securities; and any managing r domestic support obligations,
<b>₫</b> No					
Yes. List all payments t	to an insider.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			•	\$	
Insider's Name		*	Ψ	_	
	and a second a second and a second a second and a second	<u> </u>			
Number Street					
Oth.		-			
City	State ZIP Code				annon mannon qualqua qualquad da banan mannon man anno a sa s
			\$	\$	
Insider's Name			***************************************		
Number Street		-			
					:
City	State 7IP Code	-			
City /ithin 1 year before you f ın insider?	State ZIP Code	ou make any p	ayments or trans	fer any property o	n account of a debt that benefited
ithin 1 year before you f n insider? clude payments on debts 1 No	filed for bankruptcy, did y guaranteed or cosigned by		ayments or trans Total amount pald		n account of a debt that benefited  Reason for this payment  Include creditor's name
ithin 1 year before you f n insider? clude payments on debts 1 No	filed for bankruptcy, did y guaranteed or cosigned by	y an insider.  Dates of	Total amount		· · ·
ithin 1 year before you for insider? In insider? In insider? In insider in insider in debts In insider in insider. In insider? In insider? In insider? In insider? In insider? In insider i	filed for bankruptcy, did y guaranteed or cosigned by	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? clude payments on debts  No Yes. List all payments to	filed for bankruptcy, did y guaranteed or cosigned by	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? Iclude payments on debts No Yes. List all payments to	filed for bankruptcy, did y guaranteed or cosigned by	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? Iclude payments on debts No Yes. List all payments to	filed for bankruptcy, did y guaranteed or cosigned by	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? Iclude payments on debts No Yes. List all payments to	filed for bankruptcy, did y guaranteed or cosigned by	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? Include payments on debts No Yes. List all payments to Insider's Name  Number Street	filed for bankruptcy, did y guaranteed or cosigned by hat benefited an insider.	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? Include payments on debts  No Yes. List all payments to Insider's Name  Number Street	Filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider.  State ZIP Code	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? Include payments on debts No Yes. List all payments to Insider's Name  Number Street	Filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider.  State ZIP Code	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
ithin 1 year before you for insider? clude payments on debts  No Yes. List all payments to  Insider's Name  Number Street  City  Insider's Name	Filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider.  State ZIP Code	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
fithin 1 year before you for insider? Include payments on debts  No Yes. List all payments to Insider's Name  Number Street  City	Filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider.  State ZIP Code	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name	Filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider.  State ZIP Code	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name	Filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider.  State ZIP Code	y an insider.  Dates of	Total amount paid	Amount you still owe	Reason for this payment

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 46 of 60

<b>JENNIFER</b>	M. REYES

Page 46 of 60		
age +0 01 00		

Debtor 1	JENNIFER M. REYES	Case number (if known)	
	First Name Last Name		<del>~~~~~</del>

lithin 1 year before you filed for bank st all such matters, including personal and contract disputes.	<b>cruptcy, wer</b> injury cases,	re you a party in any la small claims actions, d	wsuit, court action, ivorces, collection sui	or administrative proce ts, paternity actions, supp	eding? oort or custody modificat
Í No					
Yes. Fill in the details.					
	Natur	e of the case	Court or agend	ç <b>y</b>	Status of the case
Case title	***************************************		Court Name		—— Pending
	<del></del> ',		Number Street	MONTH 19-14-	On appeal Concluded
Case number			City	State ZIP Code	
		Company to discontinuous tempt, Plats solution communication		State Zir Code	
Case title			Court Name		Pending
	-		Number Street		On appeal Concluded
Case number			City	State ZIP Code	<del></del>
No. Go to line 11. Yes. Fill in the information below.	below.			osed, garnished, attache	
	<b>2010 W</b> .	Describe the propert		Date	
	<b></b>		·	Date	Value of the property
Yes. Fill in the information below.		Explain what happen	y	Date	Value of the property
Yes. Fill in the information below.  Creditor's Name		Explain what happen Property was re	ed epossessed. preclosed.	Date	Value of the property
Yes. Fill in the information below.  Creditor's Name  Number Street	ZIP Code	Explain what happen Property was re Property was fo	ed epossessed. preclosed.	Date	Value of the property
Yes. Fill in the information below.  Creditor's Name  Number Street		Explain what happen Property was re Property was fo	ed epossessed. preclosed. arnished. ttached, seized, or lev	Date	Value of the property
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2		Explain what happen Property was re Property was fo Property was g	ed epossessed. preclosed. arnished. ttached, seized, or lev	Date  Aied.	Value of the property
Yes. Fill in the information below.  Creditor's Name  Number Street		Explain what happen Property was re Property was fo Property was g	ed epossessed. preclosed. arnished. ttached, seized, or lev	Date  Aied.	Value of the property  \$  Value of the property
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2		Explain what happen Property was re Property was fo Property was g	ed epossessed. preclosed. arnished. ttached, seized, or lev	Date  Aied.	Value of the property  \$  Value of the property
Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2		Explain what happen Property was re Property was go Property was a Property was a	ed epossessed. preclosed. arnished. ttached, seized, or lev	Date  Aied.	Value of the property  \$  Value of the property

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 47 of 60

Case number (if known)

Debtor 1 JENNIFER M. REYES
First Name Middle Name

1 No			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	*
Creditor's Name		was taken	Amount
Creditor's reame		*	
Number Street			\$
City State ZIP Code	Last 4 digits of account number: XXXX		
thin 2 years before you filed for bankru	ptcy, did you give any gifts with a total value of more than \$6	600 per person?	
No	ptcy, did you give any gifts with a total value of more than \$6	600 per person?	
No	ptcy, did you give any gifts with a total value of more than \$6  Describe the gifts	Dates you gave	Value
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600			Value \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person			Value \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person			Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person			Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift			Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code			Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street			Value \$ \$

Person to Whom You Gave the Gift

Person's relationship to you \_

State ZIP Code

Number Street

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 48 of 60

Debtor	1	,

Yes. Fill in the details for each gift or co	ontribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
Number Street	<del></del> 		\$
City State ZIP Code	_		
aster, or gambling?	iptcy or since you filed for bankruptcy, did you lose anything	because of theft,	fire, other
aster, or gambling? No	iptcy or since you filed for bankruptcy, did you lose anything	because of theft,	fire, other
aster, or gambling? No	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	because of theft,  Date of your loss	
nster, or gambling?  No  Yes. Fill in the details.  Describe the property you lost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of property
Aster, or gambling?  No  Yes. Fill in the details.  Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your	Value of property lost
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trainin 1 year before you filed for bankru consulted about seeking bankruptcy	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Insters Introduction on your behalf pay or trary or preparing a bankruptcy petition?	Date of your loss	Value of property lost
Aster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trachin 1 year before you filed for bankrupt consulted about seeking bankruptcy	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Introduction of the loss of the	Date of your loss	Value of property lost

Email or website address

Person Who Made the Payment, if Not You

State

ZIP Code

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main

Debtor 1 JEN

		Document	Page 49 of 60
<b>JENNIF</b>	ER M. REYES		Case number (# known)
First Name	Middle Name	Last Name	

	Description and value of any property tr	ansierreo	Date payment or transfer was made	Amount of payment
Person Who Was Paid	- ;			<b>c</b>
Number Street	-			<u> </u>
	•		<del></del>	\$
City State ZIP Code	 			
Email or website address				
Person Who Made the Payment, if Not You				
not include any payment or transfer that the second	itors or to make payments to your cred you listed on line 16.	itors?		
	Description and value of any property tra		Date payment or transfer was	Amount of pay
Person Who Was Paid			made	
Number Street	-		***************************************	\$
	- '			\$
City State ZIP Code in 2 years before you filed for bankru	ptcy, did you sell, trade, or otherwise tr	ansfer any property to	anyone, other tha	n property
in 2 years before you filed for bankru sferred in the ordinary course of your	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty).
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of live already listed on this statement.		rtgage on your pro	
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you have been selected. Fill in the details.	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty). Date transfe
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you have been been details.  Person Who Received Transfer	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty). Date transfe
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you have been been details.  Person Who Received Transfer	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty). Date transfe
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you have been seen to the details.  Person Who Received Transfer	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty). Date transfe
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty). Date transfe
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you have been details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty). Date transfe
in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you have been details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	ptcy, did you sell, trade, or otherwise tr business or financial affairs? made as security (such as the granting of tive already listed on this statement.  Description and value of property	a security interest or mo  Describe any property or	rtgage on your pro	perty).  Date transi

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 50 of 60

Debtor 1

JENNIFER M. REYES

First Name Middle Name Lest Name

Case number (if known)

Description and value of the property transferred  Date transfer was made  Name of trust  Description and value of the property transferred  Name of trust  Description and value of the property transferred  Name of trust  Date transferred  Name of trust  Date transferred  Name of financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, tossed, sold, moved, or transferred?  Note that the description of the property transferred to the property transferred transferred to the property transferred	1 No				
List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units   Vithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, losed, sold, moved, or transferred?   Chude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rockerage houses, pension funds, cooperatives, associations, and other financial institutions.    Note	_				
List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units   Vithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, losed, sold, moved, or transferred?   Chude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rockerage houses, pension funds, cooperatives, associations, and other financial institutions.    Note		Description and value of the prope	erty transferred		
Search   State   Sta				• • • • • • • • • • • • • • • • • • • •	
Vithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, liosed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.    Vestate   Type of account or instrument   Type of account was closed, sold, moved, or transferred	Name of trust	<b>—</b> :			
Vithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, liosed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.    Vestate   Type of account or instrument   Type of account was closed, sold, moved, or transferred					: : : :
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, losed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No				all throat rate or common a special page 1 to tal common accounts	
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  nclude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, prokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No	an an engan sa and sa ang sa ang ang ang ang ang ang ang ang ang an		et e tradition to a state of the	т стретут при	eth, ethan harat at a tarain a said, et arman harba ann ann ann an ar ar ar
closed, sold, moved, or transferred?	8: List Certain Financial Account	s, Instruments, Safe Deposit	Boxes, and Storage	e Units	
nclude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, crokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No	ithin 1 year before you filed for bankrup	tcy, were any financial accounts (	or instruments held in	your name, or for your	benefit,
Anne of Financial institution    Name of Financial institution   XXXX	osed, sold, moved, or transferred?				
No	clude checking, savings, money market rokerage houses, pension funds, coope	, or other financial accounts; certi	ificates of deposit; sha	res in banks, credit un	ions,
Last 4 digits of account number    Type of account or instrument   Type of account was closed, sold, moved, or transferred   Closing or transferred		auves, associations, and other m	nancial institutions.		
Name of Financial Institution  XXXX	-				
Name of Financial Institution  XXXX		Last 4 digits of account number	Type of account or	Date account was	l aet balanco bofe
Number Street   Savings   Money market   Brokerage   Other   Name of Financial institution   Savings   Money market   Savings   Money market   Brokerage   Other   Number Street   Ghecking   Savings   Money market   Brokerage   Other   Other   Other   Other   Other   Other   Oyou now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?    No   Yes, Fill in the details.   Who else had access to it?   Describe the contents   Do you st have it?   No   Name		<u> </u>		closed, sold, moved,	closing or transfe
Number Street    Savings   Money market   Brokerage   Other   Name of Financial institution   XXXX   Checking   Savings   Money market   Brokerage   Other   City   State   ZIP Code   Other	Name of Financial Institution				
Money market   Brokerage   Other		XXXX	<del>-</del>		\$
City State ZIP Code    Other	Number Street	•	_		
City State ZIP Code    Other		•			
Name of Financial Institution    Checking   Savings     Money market     Brokerage     Other	City State ZIP Code				
Number Street    Money market	-		U Other		
Number Street  Money market  Brokerage  Other  Oyou now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for ecurities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial Institution  Name		VVVV	Па		
Number Street    Money market     Brokerage     Other     Other	Name of Financial Institution		•	<u></u>	\$ <u></u>
Brokerage  Other  Other  To you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for ecurities, cash, or other valuables?  No  Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  Name  Name  Name					
City State ZIP Code  To you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for ecurities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  Name of Financial Institution  Name	number Street				
City State ZIP Code  To you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for ecurities, cash, or other valuables?  No  Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No  Name of Financial Institution  Name					
ecurities, cash, or other valuables?  No  Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  Name of Financial Institution  Name	2		☐ Other		
ecurities, cash, or other valuables?  No  Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  Name of Financial Institution  Name	City State ZIP Code				
Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  Name of Financial Institution  Name  Name	•	was hafana was 61 - f f h h			
Who else had access to it?  Describe the contents  Do you st have it?  Name of Financial Institution  Name  Name	you now have, or did you have within 1	year before you filed for bankrup	tcy, any safe deposit b	ox or other depository	for
Name of Financial Institution  Name  Name	you now have, or did you have within 1 curities, cash, or other valuables?	year before you filed for bankrup	tcy, any safe deposit b	ox or other depository	<i>t</i> for
Name of Financial Institution Name	you now have, or did you have within 1 curities, cash, or other valuables?	year before you filed for bankrup	tcy, any safe deposit b	ox or other depository	<i>i</i> for
Name of Financial Institution Name	you now have, or did you have within 1 curities, cash, or other valuables?				Do you sti
	you now have, or did you have within 1 curities, cash, or other valuables?			contents	Do you sti have it?
Number Street Number Street	you now have, or did you have within 1 curities, cash, or other valuables? No Yes. Fill in the details.			contents	Do you sti have it?
- Visut	you now have, or did you have within 1 curities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?		contents	Do you sti have it?
· · · · · · · · · · · · · · · · · · ·	you now have, or did you have within 1 curities, cash, or other valuables?  No Yes. Fill in the details.	Who else had access to it?		contents	Do you sti have it?

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 51 of 60

Debtor 1	<b>JENNIFER</b>	M.	REY	1

Debtor 1	JENNIFER	RM. REYES		Case number (if known)
	First Name	Middle Name	Last Name	

	Who else has or had access to it?	Deposits the sentent	_
	Mile cise that of flad access to it?	Describe the contents	Do you s have it?
Name of Storage Facility	Name		□ No
• •			☐ Yes
Number Street	Number Street		
Markette de la companya del companya del companya de la companya d	City State ZIP Code		
City State ZIP	Code		
it 9: Identify Property You	Hald on Control to Consum or		
	Hold or Control for Someone Else		
or hold in trust for someone.	ty that someone else owns? Include any pr	operty you borrowed from, are storing	for,
₩ No			
Yes. Fill in the details.			
	Where is the property?	Describe the property	Value
Owner's Name			\$
Number Street	Number Street		
- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
City China	City State ZIP (	ode	
	Code	Code	
-	Code City State ZIP (	ode	
rt 10: Give Details About Er	vironmental Information	Code	
r the purpose of Part 10, the following Environmental law means any fede	nvironmental Information  ng definitions apply: eral, state, or local statute or regulation con	cerning pollution, contamination, relea	ases of
r the purpose of Part 10, the following Environmental law means any fede hazardous or toxic substances, was	nvironmental Information  ng definitions apply:  eral, state, or local statute or regulation constess, or material into the air, land, soil, sur	cerning pollution, contamination, relea face water, groundwater, or other med	ases of ium,
rt 10: Give Details About Er  r the purpose of Part 10, the followi  Environmental law means any fede hazardous or toxic substances, wa including statutes or regulations co	nvironmental Information  ng definitions apply: eral, state, or local statute or regulation constes, or material into the air, land, soil, surontrolling the cleanup of these substances	cerning pollution, contamination, relea face water, groundwater, or other med wastes, or material.	ium,
rt 10: Give Details About Er  the purpose of Part 10, the followi  Environmental law means any fede hazardous or toxic substances, wa including statutes or regulations of  Site means any location, facility, or	nvironmental Information  Ing definitions apply:  Peral, state, or local statute or regulation consistes, or material into the air, land, soil, surontrolling the cleanup of these substances  To property as defined under any environmental	cerning pollution, contamination, relea face water, groundwater, or other med wastes, or material.	ium,
r the purpose of Part 10, the following Environmental law means any feder hazardous or toxic substances, was including statutes or regulations of the means any location, facility, or utilize it or used to own, operate, or	nvironmental Information  Ing definitions apply:  Iral, state, or local statute or regulation constes, or material into the air, land, soil, surontrolling the cleanup of these substances property as defined under any environment utilize it, including disposal sites.	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operate	ium, e, or
the purpose of Part 10, the following the purpose of Part 10, the following the purpose of Part 10, the	nvironmental Information  Ing definitions apply:  Peral, state, or local statute or regulation consistes, or material into the air, land, soil, surontrolling the cleanup of these substances  To property as defined under any environmental	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operate	ium, e, or
rt 10: Give Details About Error the purpose of Part 10, the following Environmental law means any feder hazardous or toxic substances, was including statutes or regulations considered means any location, facility, or utilize it or used to own, operate, of the Hazardous material means anything substance, hazardous material, poles.	nvironmental Information  ng definitions apply:  eral, state, or local statute or regulation consistes, or material into the air, land, soil, surontrolling the cleanup of these substances property as defined under any environment rutilize it, including disposal sites.  g an environmental law defines as a hazarollutant, contaminant, or similar term.	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operate fous waste, hazardous substance, toxi	ium, e, or
r the purpose of Part 10, the following the purpose of Part 10, the fo	nvironmental Information  Ing definitions apply:  Iral, state, or local statute or regulation consistes, or material into the air, land, soil, sure ontrolling the cleanup of these substances or property as defined under any environment of utilize it, including disposal sites.  If an environmental law defines as a hazard llutant, contaminant, or similar term.	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operate lous waste, hazardous substance, toxi when they occurred.	ium, e, or c
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the purpose of Part 10, the following Environmental law means any fede hazardous or toxic substances, was including statutes or regulations of the means any location, facility, or utilize it or used to own, operate, of the means anything substance, hazardous material, polyoort all notices, releases, and processes any governmental unit notified.	nvironmental Information  Ing definitions apply:  Iral, state, or local statute or regulation consistes, or material into the air, land, soil, sure ontrolling the cleanup of these substances or property as defined under any environment or utilize it, including disposal sites.  If an environmental law defines as a hazard llutant, contaminant, or similar term.  Inseedings that you know about, regardless of you that you may be liable or potentially liable.	cerning pollution, contamination, releat face water, groundwater, or other medi , wastes, or material. Intal law, whether you now own, operate lous waste, hazardous substance, toxi when they occurred.	ium, e, or ic mental law?
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r the purpose of Part 10, the following Environmental law means any fede hazardous or toxic substances, was including statutes or regulations of the means any location, facility, or utilize it or used to own, operate, on the means anything substance, hazardous material, polyport all notices, releases, and process any governmental unit notified to the Mo	nyironmental Information  Ing definitions apply:  Iral, state, or local statute or regulation consistes, or material into the air, land, soil, sure ontrolling the cleanup of these substances property as defined under any environment rutilize it, including disposal sites.  If an environmental law defines as a hazard llutant, contaminant, or similar term.  It is eadings that you know about, regardless of you that you may be liable or potentially liable.  Governmental unit	cerning pollution, contamination, releat face water, groundwater, or other medi , wastes, or material. Intal law, whether you now own, operate lous waste, hazardous substance, toxi when they occurred.	ium, e, or ic mental law?

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 52 of 60 Document

Debtor 1

A control of the state of the case   Case of the	JENNIFER M. REYES First Name Middle Name is		Case number (if known)	
No.   Yes. Fill in the details.   Governmental unit	First Name Middle Name La	ast Name		
No.   Yes. Fill in the details.   Governmental unit				
See Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice		of any release of hazardous materia	11?	
Number Street   Statu of the case   Court Number Street   City   State ZIP Code				
Name of alite    Number   Street   Stre	■ Yes. Fill in the details.	Carramanantal conta	· ·	
Number Street   Number Street   Number Street   Number Street   City   State   ZIP Code		Governmental unit	Environmental law, if you know it	Date of notice
Number Street    Number Street   Number Street   Number Street		_		en de la companya de
City State ZIP Code  As ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  A sole and the details.  Court or agency Nature of the case Status of the case  Case title  Court Name  Court Name  Court Name  Court Name  Court Name  Court Name  City State ZIP Code  Conclude  Case number  City State ZIP Code  Conclude or part-time o	Name of site	Governmental unit		
An ember of a limited liability company (LLC) or limited liability partnership A partner in a partnership A nowner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a business  Describe the nature of the business  Describe the nature of the business  Employer identification number  Dates business existed  From	Number Street	Number Street	The state of the s	
An ember of a limited liability company (LLC) or limited liability partnership A partner in a partnership A nowner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a business  Describe the nature of the business  Describe the nature of the business  Employer identification number  Dates business existed  From				
Ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.    No		City State ZiP Code		
Nature of the case    Court or agency   Nature of the case   Status of the case	City State ZIP Code	_		
Court or agency				
Case title		dministrative proceeding under any	environmental law? Include settlements	and orders.
Case title				
Case title	z res. Fill in the details.	<u> </u>	English State of the North Action	Status of the
Court Name   Pending   Con appear   Conclude		Court or agency	Nature of the case	
On appeal   Conclude	Case title	WANTED IN THE PROPERTY OF THE		П.,
Number   Street   Case number   City   State   ZiP Code		Court Name	_	-
Tity State ZiP Code    City State ZiP Code		Number Street	<b>_</b>	
Itili Give Details About Your Business or Connections to Any Business  ithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EIN:  Number Street  Name of accountant or bookkeeper  Dates business existed  Employer Identification number  Do not Include Social Security number or ITIN.  Employer Identification number  Do not Include Social Security number or ITIN.  EIN:  Do not Include Social Security number or ITIN.  Number Street  Name of accountant or bookkeeper  Dates business existed  From		Contract Contract		Conclude
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time     A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time     A member of a limited liability company (LLC) or limited liability partnership (LLP)     A partner in a partnership     An officer, director, or managing executive of a corporation     An owner of at least 5% of the voting or equity securities of a corporation     No. None of the above applies. Go to Part 12.     Yes. Check all that apply above and fill in the details below for each business.     Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     EIN:     City   State   ZIP Code   Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     Business Name   Do not include Social Security number or ITIN.     Describe the nature of the business   Employer Identification number     Do not include Social Security number or ITIN.     EIN:     Number   Street   Name of accountant or bookkeeper   Dates business existed     From To     Dates business existed   From To	Case number	City State ZIP Code	_	
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time		•		
An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EiN:  Number Street  Name of accountant or bookkeeper  Dates business existed  From To  City State ZiP Code  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EIN:  Number Street  Name of accountant or bookkeeper  Dates business existed  From To  EIN:  Dates business existed	☐ A sole proprietor or self-employed ☐ A member of a limited liability com ☐ A partner in a partnership	I in a trade, profession, or other acti npany (LLC) or limited liability partn	vity, either full-time or part-time	ny business?
No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Business Name    Number Street   Name of accountant or bookkeeper   Dates business existed	<u> </u>		lian	
Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:		•	nor.	
Business Name    Number Street   Name of accountant or bookkeeper   Dates business existed				
Business Name    Number Street   Do not include Social Security number or ITIN.	- 100. Officer air that apply above and in			umher
Name of accountant or bookkeeper	Business Name			
Name of accountant or bookkeeper			EIN.	
City State ZIP Code  Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN.  EIN:	Number Street			
City State ZIP Code  Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN.  EIN:		Name of accountant or bookkeeper	Dates business existed	
City State ZIP Code  Describe the nature of the business Employer Identification number  Do not include Social Security number or ITIN.  EIN:		-	From	
Business Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EIN:	City State ZIP Code	•		
Number Street  Name of accountant or bookkeeper  Dates business existed  FromTo			Employer Identification nu	
Name of accountant or bookkeeper Dates business existed  From To	Business Name	**************************************	Do not include Social Sec	urity number or ITIN.
Name of accountant or bookkeeper Dates business existed			EIN:	
From To	Number Street	Name of accountant or bookkasses	The state of the s	
			Vales pusiness existed	
			From To	
	City State 710 Code	- [	1.000	

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Page 53 of 60 Document

	Last Name Case number (if known)
	Describe the nature of the business Employer Identification number  Do not include Social Security number or I
Business Name	EIN:
Number Street	Name of accountant or bookkeeper Dates business existed
March Control of the	
City State ZIP Code	From To
Vithin 2 years before you filed for ban!	kruptcy, did you give a financial statement to anyone about your business? Include all financia
nstitutions, creditors, or other parties.	i.
No	
Yes. Fill in the details below.	
	Date issued
Name	MM / DD / YYYY
Number Street	
City State ZIP Code	<del></del>
112: Sign Below	
I have read the answers on this Stater	ment of Financial Affairs and any attachments, and I declare under penalty of perjury that the
I have read the answers on this Stater, answers are true and correct. I unders in connection with a bankruptcy case	stand that making a false statement, concealing property, or obtaining money or property by free can result in fines up to \$250.000, or imprisonment for up to 20 years, or both
have read the answers on this Statemanswers are true and correct. I unders	stand that making a false statement, concealing property, or obtaining money or property by free can result in fines up to \$250.000, or imprisonment for up to 20 years, or both
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have read the answers on this Stater answers are true and correct. I understin connection with a bankruptcy case 18 U.S.C. §§ 152, 1341, 1519, and 3571  Signature of Debtor 1  Date  Did you attach additional pages to You	stand that making a false statement, concealing property, or obtaining money or property by free can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 2
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have read the answers on this Stater answers are true and correct. I unders n connection with a bankruptcy case 18 U.S.C. §§ 152, 1341, 1519, and 3571  Signature of Debtor 1  Date  Did you attach additional pages to You  No Yes	stand that making a false statement, concealing property, or obtaining money or property by free can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 2  Date  Ur Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
I have read the answers on this Stater, answers are true and correct. I unders in connection with a bankruptcy case 18 U.S.C. §§ 152, 1341, 1519, and 3571  Signature of Debter 1  Date  Did you attach additional pages to You Yes  Did you pay or agree to pay someone to the page of th	stand that making a false statement, concealing property, or obtaining money or property by free can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 2
I have read the answers on this Stater answers are true and correct. I understin connection with a bankruptcy case 18 U.S.C. §§ 152, 1341, 1519, and 3571  Signature of Debter 1  Date  No  Yes  Did you attach additional pages to You  No  Yes	stand that making a false statement, concealing property, or obtaining money or property by free can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 2  Date  Ur Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Dago E4 of 60

Fill in this inf	ormation to id	entify your case:		J4 01 00	
Debtor 1	JENNIFER	M. REYES			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court	for the: NORTHERN DIS	TRICT OF ILLINOIS		
Case number (If known)	4	**************************************	Tak 14 Harrison		☐ Check if this is amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**List Your Creditors Who Have Secured Claims** 

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's name:	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	<u> </u>
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	
		Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	00
	Retain the property and [explain]:	

Case 19-04309 Doc 1 Filed 02/19/19

Document

Entered 02/19/19 11:01:17 Desc Main Page 55 of 60

Debtor 1

JENNIFER M. REYES

Last Name

Case number (If known)

### Part 2: **List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: HASTINGS	□ No
Description of leased RENT property:	<b>ଔ</b> Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	The state of the s
Description of leased property:	Yes
Lessor's name:	☐ No
Description of leased property:	Yes
Lessor's name:	
Description of leased property:	Yes
Lessor's name:	
Description of leased property:	Yes
Lessor's name:	
Description of leased property:	Yes
13: Sign Below	
nder penalty of perjury, I declare that I have indic ersonal property that is subject to an unexpired le	ated my intention about any property of my estate that secures a debt and any ease.
	*
Signature of Debtor 1	Signature of Debtor 2
Date MM / DD / YYYY	Date

# NORTHERN DISTRICT OF ILLINOIS IN THE UNITED STATES BANKRUPTCY COURT FOR THE

IN RE:  JENNIFER M. REYES  Debtor.	) ) Case No					
VERIFICATION OF MATRIX						
The above named debtor hereby verifie and correct to the best of his/her/their kr	s that the attached List of Creditors is true nowledge.					
Date: 03 18 19	Debtor Signature					

ΑI	llis	ant	$^{\circ}$	Ħ
/ N	ш	A 1 1 L	_	ч

Pob 66945

Chicago, IL 60666

Bk Of Amer

Pob 15026

Wilmington, DE 19801

Big Picture Loans

P O Box 704

Watersmeet, MI 49969

Capital One

11013 W Broad St

Glen Allen, VA 23060

Cavalry Port

500 Summit Lake Drive Suite 400

Valhalla, NY 10595

Capital One

P O Box 60

St Cloud, MN 56302

Carl E Hill

841 Dodge Avenue

Evanston, IL 60202

Cavalry Portfolio Services 500 Summit Lake Drive Valhalla, NY 10595

Comed

P O Box 805379

Chicago, IL 60680

Dpt Ed Navi

Po Box 9635

Wilkes Barre, PA 18773

Fncc

500 East 60th St North

Sioux Falls, SD 57104

**Fst Premier** 

3820 N Louise Ave

Sioux Falls, SD 57107

Fingerhut

6250 Ridgewood Road

St Cloud, MN 56303

First National

500 East 60th Street North

Sioux Falls, SD 57104

Hastings

1805 Madison Street

Evanston, IL 60202

Jtm Capital

6400 Sheridan Drive

Williamsville, NY 14221

Jefferson Capital Systems Lic

P O Box 772813

Chicago, IL 60677-2813

Lvnv Funding

C O Resurgent Capital Services Po Box 1269

Greenville, SC 29602

Mi Bmoharris

Po Box 1111

Madison, WI 53701

Profburcol

5295 Dtc Parkway

Greenwood Village, CO 80111

Portfolio Recovery Associates Llc

120 Corporate Blvd

Norfolk, VA 23502

Case 19-04309 Doc 1 Filed 02/19/19 Entered 02/19/19 11:01:17 Desc Main Document Page 60 of 60

Presence Medical Group 62314 Collections Drive Chicago, IL 60693

Harris & Hams WALLTO \$ 100.12 111 West Jackson Barbard Sute 40 Chicago IL GOLOY